FORM D

2007

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION OMB APPROVAL

Estimated average burden

OMB Number: 3235-0076

Expires: May 31, 2002



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	this is an amendment and name has changed, and in	dicate change.)				
PG - Global Properties, LLC		,				
Filing Under (Check box(es) that a	pply): 🗌 Rule 504 🔲 Rule 505 🗵 Rule 506	☐ Section 4(6) ☐ ULOE				
Type of Filing: 🛮 New Filing	☐ Amendment					
	A BASIC IDENTIFICATION DATA					
I. Enter the information requested						
Name of Issuer (check if this	is an amendment and name has changed, and indic	ate change.)				
PG - Global Properties, LLC						
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
135 Fifth Avenue, 10th Floor, New York,	212-739-7711					
Address of Principal Business Ope if different from Executive Office	erations (Number and Street, City, State, Zip Code) s)	Telephone Number (Including Area Code)				
Brief Description of Business						
Develop investment opportunities inv	olving the ownership, repositioning and/or conversion of	hotel and other real-state as a CCCD				
•		PROCESSED				
i		i i				
Type of Business Organization		APR 1 1 2007				
corporation	☑ other (please specify):					
☐ business trust	☐ limited partnership, to be formed	limited liability company THOMSON				
	Month Year	FINANCIAL				
Actual or Estimated Date of Inco		☑ Actual ☐ Estimated				
Jurisdiction of Incorporation or O	rganization: (Enter two-letter U.S. Postal Service ab	احالحا				
:	CN for Canada; FN for other foreign	jurisdiction) DE				
00110010		·				

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays SEC 1972 (7-00) 1 of 8 a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA		
2. Enter the information requested for the following:		ı
• Each promoter of the issuer, if the issuer has been organized within the past five		
• Each beneficial owner having the power to vote or dispose, or direct the vote or dissecurities of the issuer;	isposition of, 10%	6 or more of a class of equity
Each executive officer and director of corporate issuers and of corporate general and re-	nanaging partners	of partnership issuers; and
• Each general and managing partner of partnership issuers.		•
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
The WOW Group, LLC		
Business or Residence Address (Number and Street, City, State, Zip Code)		
135 Fifth Avenue, 10th Floor, New York, NY 10010		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Office	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Mathis, Scott L. Business or Residence Address (Number and Street, City, State, Zip Code)		
* * * * * * * * * * * * * * * * * * * *		
135 Fifth Avenue, 10th Floor, New York, NY 10010		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Office	r 🗍 Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Holderbaum, Tim		1 1
Business or Residence Address (Number and Street, City, State, Zip Code)		•
135 Fifth Avenue, 10th Floor, New York, NY 10010		· · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Office	r 🗆 Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Office	r □ Director	General and/or Managing Partner
Full Name (Last name first, if individual)		—·
Business or Residence Address (Number and Street, City, State, Zip Code)		<u> </u>
Chamber and Buren, Chy, Care, Elip Code,		•
Check Box(es) that Apply: Promoter Beneficial Owner Executive Office	er 🗆 Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Office	er 🗆 Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	····	
<u> </u>		a
Business or Residence Address (Number and Street, City, State, Zip Code)		
(Use blank sheet, or copy and use additional copies of this sh	eet, as necessary	3
(And present friends of anti- and and additional acknowled or suite and	,	• ,

1.			train[4.	B. IN	FORMA	TION A	BOUT OF	FERING	3				
1. Has th	ie issuer so	ld, or doe	s the issue	r intend to	sell, to n	on-accredi	ted investo	ors in this	offering?			Yes	No ⊠
			Ansv	ver also in	Appendi	x, Column	2, if filing	g under UI	LOE.				
2. What	is the mini	mum inve	stment tha	t will be a	ccepted fre	om any ind	lividual?.				\$ 1	00,000.	00
1												Yes	No
3. Does	the offering	g permit jo	int owners	ship of a si	ingle unit?							×	
1		•		•			•	-	•	irectly, any			
										offering, I vith a state			
list th	e name of t	the broker	or dealer.	If more th	nan five (5) persons t	to be listed	l are assoc		ons of such			
or dea	iler, you m	nay set for	rth the info	ormation f	or that bro	oker or de	aler only						"
Full Name	(Last name	first, if i	ndividual)				· ·	-					b.
Business of	Residence	Address	(Number a	and Street,	City, Stat	te, Zip Coo	de)						
I_v.astDuivat	. 1												
InvestPrivat Name of A		Broker or	Dealer				·						
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135 Fifth A					ada += 0-1	inie Dt			· · · · · ·				
States in W	nich Perso	n Listed I	nas Solicit	ea or inte	nus to 501	icii rurcha	isers						1
(Check "	All States"	or check	individual	States)	. 		. <i>.</i>		<i></i>	<i>.</i>	I	⊐ AII S	States
[AL]	[AK]	[AZ]	(AR)	(CA)	[CO]	(CT)	[DE]	[DC]	(FL)	(GA)	[HI]	[ID	1
	[NI]	[IA]	(KS)	[KY]	[LA]	[ME]	(MD)	(MA)	(MI)	(MN)	[MS]	[MO	-
[MT]	[NE]	[NV]	[NH]	(NJ)	[NM]	(NY)	(NC)	[ND]	[OH]	[OK]	[OR]	PA	Ò
[RI]	(SC)	[SD]	[TN]	(TX)	[UT]	[VT]	[VA]	(WA)	[WV]	WI	[WY]	[PR]
Full Name	(Last nam	e first, if i	ndividual)						•		•	1	1
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Business o	r Residenc	e Address	(Number	and Street	, City, Sta	te, Zip Coo	de)				 _		
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Name of A	secciated I	Droker or	Dealer								 -		
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States in V	hich Perso	on Listed	Has Solici	ted or Inte	nds to Sol	icit Purcha	asers						
(Check	'All States'	or check	individual	States)			,			, , , , , , , , ,		□ All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	{ CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[][[IN]	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	[MC	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	{ PR	<u>} </u>
Full Name	(Last nam	e first, if i	individual))									
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Business o	r Residenc	e Address	(Number	and Street	, City, Sta	te, Zip Co	de)				· · · · · · · · · · · · · · · · · · ·		
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Name of A	ssociated	Broker or	Dealer		<u> </u>	***************************************			····			 	1
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States in \	Which Pers	on Listed	Has Solici	ted or Inte	ends to So	licit Purch	asers						
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, [RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	[]

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	The state of the s		:	
19.49.	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	Spire .	1 Viga war
alr che	ter the aggregate offering price of securities included in this offering and the total amount eady sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, ck this box and indicate in the columns below the amounts of the securities offered for exchange dalready exchanged.	Aggregate		≟n
	Type of Security Debt	Aggregate Offering Price \$	So	old
•	Equity	\$	\$	
	☐ Common ☐ Preferred	110	4 10 10	
	Convertible Securities (including warrants)	\$	\$	1-1
	Partnership Interests		s	
•	Other (Specify non-managing membership interests)	\$ 2,568,340.00	\$ 2,50	58,340.0
••	Total	\$ 2,568,340.00	\$ 2.50	68,340.0
	Answer also in Appendix, Column 3, if filing under ULOE.			- '44
of ca	nter the number of accredited and non-accredited investors who have purchased securities in this fering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indite the number of persons who have purchased securities and the aggregate dollar amount of their			,
pι	irchases on the total lines. Enter "0" if answer is "none" or "zero."	Number		r Amoun
	The Charles and a second of the second of th	Investors	r	rchases
	Accredited Investors.	- '-63	~ <u>\$ 1 2,3</u>	68,340.0
	Non-accredited Investors		\$	
		63	\$ <u>}- 2,5</u>	68,340.0
٠.	Answer also in Appendix, Column 4, if filing under ULOE.			·········
ti	this filing is for an offering under Rule 504 or 505, enter the information requested for all securies sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			are the ar
. Y	Type of offering Rule 505	Type of Security	Dollar S	Sold)
4	Regulation A		- s	**
	Rule 504'	\$	s	
	Rule 504'. Total	- 4 m - 1 tm - 1	\$. <u> </u>
S	Furnish a statement of all expenses in connection with the issuance and distribution of the ecurities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure s not known, furnish an estimate and check the box to the left of the estimate.	والمستسيا يسمدان يجاحون		to y to
	Transfer Agent's Fees		\$	
	Printing and Engraving Costs		\$	2,500.
	Legal Fees	D	\$	18,000.
	Accounting Fees	45 & A	\$	1,000.
	Engineering Fees		! \$ *	
	Sales Commissions (specify finders' fees separately)		\$	
14m — 44h s n.a	Other Expenses (identify) Placement Agent Fee + Non-Accountable Expense Fee		1	333,884
17.	Other Expenses (identify) Total Total		\$	355,384.
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